PTO/SB/01 (10-01.
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number Att rney Docket Number **DECLARATION FOR UTILITY OR** ZHANG-MU XU First Named Inventor **DESIGN** COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) Application Number Filing Date **☑** Declaration Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) Submitted Art Unit with Initial

Filing	(37 CFR 1.16 (e)) required)	Examiner Name					
As the below named inventor, I hereby declare that:							
My residence, mailing address, and citizenship are as stated below next to my name.							
I believe I am the original and first inv	entor of the subject matter wh	hich is claimed and for whi	ch a patent is soug	tht on the invention entitled:			
	·						
{	The way to avoid the accident of surgical operation						
of doctor an	d it's observable	appliance .					
i L							
(Title of the Invention)							
the specification of which		•					
is attached hereto							
OR							
was filed on (MM/DD/YYYY)	as United States Application Number or PCT International						
L_ 							
Application Number	and was amender	d on (MM/DD/YYYY)		(if applicable).			
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I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant							
breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO			
1							
Additional foreign application nu	mbers are listed on a suppler	mental priority data sheet f	PTO/SB/02B attach	ned hereto:			

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time, you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:				······································		
Name 1315 CLINTON ST . Apt . 3B Address NEW YORK , City State N.Y. 10002 ZIP 10002 Country U. S.A. Telephone (212) 4778719 Fax (212) 4778719 I hereivy declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or both. under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: Apelition has been filed for this unsigned inventor Given Name						
NEW YORK State N. Y 10002	——————————————————————————————————————					
NEW YORK , State N.Y. 10002 Linerally declare that all statements made herein of your knowledge are rue and that all statements made on information are believed to be true; and further that these statements were made with the knowledge that willful false statements and the files of made are pulseful to be true; and further that these statements were made with the knowledge that willful false statements and the files of made are pulseful for or improsomment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Given Name ZHANGMU Family Name or Surname Date Date Date NEW YORK , N.Y. U.S.A. U.S.A. Citizenship 1315 CLINTON ST. Apt. 3B Mailing Address NEW YORK , State ZIP Country Country Country Country Country Country Country Citizenship Inventor's Signature Date Residence: City State Country Citizenship City State Country Citizenship Mailing Address City State Country Citizenship Country Citizenship						
City U. S. A. Telephone (212) 4778719 Fax (212) 4778719 Invertive declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or impressment or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Inventor's Signature Date Date NEW YORK, N. Y. U. S. A. U. S. A. Citizenship 1315 CLINTON ST. Apt. 3B Mailing Address NEW YORK, N. Y. ZIP 10002 Country Country Country NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Family Name or Surname Family Name or Surname Family Name or Surname Family Name or Surname Date Mailing Address City State Country Citizenship Mailing Address City State Country Citizenship Date		Apt. 3B				
Invertor's Signature	,					
are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or improsoment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Inventor's Signature Date NEW YORK, State NEW YORK, N.Y. State NEW YORK, N.Y. State NEW YORK, N.Y. State NEW YORK, N.Y. State NEW YORK, State Country NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Family Name or Surname Family Name or Surname Civen Name (first and middle [if any]) Newnord Residence: City State Country Citizenship Newnord Citizenship Name or Surname Date Residence: City State Country Citizenship	U. S. A.	phone (212) 477 8719	Fax (212) 477 8719		
Given Name (first and middle [if any]) Inventor's Signature NEW YORK , N.Y. U.S.A. U.S.A. Citizenship 1315 CLINTON ST . Apt . 3B Mailing Address NEW YORK , N.Y. 10002 U.S.A. Country NEW YORK , N.Y. 10002 U.S.A. Citizenship NEW YORK , N.Y. 10002 U.S.A. Country NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Inventor's Signature Residence: City State Country Citizenship Mailing Address City State Country Citizenship	are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the					
Inventor's Signature Date NEW YORK , N.Y. U.S.A · U.S.A · Country Citizenship 1315 CLINTON ST . Apt . 3B Mailing Address NEW YORK , N.Y. 10002 U.S.A · Country NEW YORK , State ZIP Country NEW YORK , A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Inventor's Signature Residence: City State Country Citizenship Mailing Address City State Country Citizenship Mailing Address City State Country Citizenship Mailing Address	NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor					
Signature NEW YORK , State N.Y. Country Citizenship 1315 CLINTON ST . Apt . 3B Mailing Address NEW YORK , State N.Y. 10002 U.S.A. City State State State Country NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Inventor's Signature State Country Mailing Address City State Country Citizenship Mailing Address City State Country Citizenship	Family Name					
Residence: City 1315 CLINTON ST . Apt . 3B Mailing Address NEW YORK ,		r		Date		
NEW YORK ,	<u> </u>	_	•]		
City State ZIP Country NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname Inventor's Signature Date Residence: City State Country Citizenship Mailing Address City State ZIP Country	1315 CLINTON ST . Apt . 3B					
Given Name (first and middle [if any]) Inventor's Signature Residence: City State Country City State ZIP Country		_		i		
(first and middle [if any]) Inventor's Signature Residence: City State Country City State ZIP Country	NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor					
Residence: City State Country Citizenship City State ZIP Country	Given Name Family Name					
Mailing Address City State ZIP Country				Date		
Mailing Address City State ZIP Country						
City State ZIP Country	Residence: City	State	Country	Citizenship		
City State ZIP Country	Mailing Address					
		State	ZIP	Country		
I I required inventors are being framed on thesupplemental Additional inventor(s) siteet(s) in 10/30/02A attached hereto.	 					

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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention	The way to avoid the accident of surgical operation of doctor and it's observable appliance.			
As the below named inventor(s), I/we declare that:				
This declaration is directed to:				
5	The attached application, or			
	Application No, filed on			
	as amended on(if applicable);			
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;				
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;				
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.				
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.				
FULL NAME OF INVI	ENTOR(S)			
Inventor one:	ZHANGMU XU			
Signature: 2	hang-Mu Du Citizen of: U.S.A.			
Inventor two:	V			
Signature:	Citizen of:			
Inventor three:				
Signature:	Citizen of:			
Inventor four:				
Signature:	Citizen of:			
Additional inventors are being named on additional form(s) attached hereto				

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.